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APPLICANTS

Hendrikus Petrus Elisabeth Vranken, Eindhoven, NETHERLANDS;
 Hendrik Dirk Lodewijk Hollmann, Eindhoven, NETHERLANDS;

**** CONTINUING DATA *******

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**** FOREIGN APPLICATIONS *******

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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		NETHERLANDS	6	16	2
Verified and Acknowledged	/DANIEL F MCMAHON/ Examiner's Signature	Initials				

ADDRESS

NXP, B.V.
 NXP INTELLECTUAL PROPERTY DEPARTMENT
 M/S41-SJ
 1109 MCKAY DRIVE
 SAN JOSE, CA 95131
 UNITED STATES

TITLE

Data compression

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